# การพัฒนาศักยภาพด้านการวิจัยและจริยธรรมการวิจัยของอาจารย์ วันที่ ๒๒ พฤศจิกายน ๒๕๕๕

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### Researching Death and Dying

Presentation to Boromatajonani College of Nursing, Nakhon, Lampang Associate Professor Painela van der Riet 22 November 2012

### Factors that impact on the quality of end of life

### Casey et al (2011)

- . Knowing the person and individualised care
- > Ethos of open communication between staff and patients about bad news, prognosis and treatment options
- · Culture, philosophy of the organisation of
- Multidisciplinary approach
- Physical environment and resources

### Outline

- · The importance of research in palliative care
- · Factors that impact on the quality of end of life. A recent study
- · Pamela's PhD storylines and discourses on death and dying
- · Complementary therapies for end of life care
- · Ethical issues in doing research on death and
- Challenges in researching end of life care

# Storylines and Discourses of dying

- Emotional/ Psychological Discourses Feeling Threatened, Fear of Dying/Uncertainty, Shock, Loss and Concern for Children
- · It is pretty frightening
- · that they are going to lose their mum
- That's how i feel
- · I felt threatened
- to think
- that the kids mightin't have a mother

### The importance of research in palliative care

- You might ask why research? Research is about improving practice and, therefore, producing good patient outcomes.
- See podcast with Professor Margaret O'Connor Vivian Bullwinkle Chair in Palliative Care Nursing http://www.youtube.com/watch?v=4weNYcp

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# Storylines and Discourses of dying

- 'Cancer Means Death'
- 'I Just Accept Each Day as it Comes'

### Emotional/ Psychological Discourses

Hope

'Keeping Going — Having a Goal' My two goals. are to see my eldest son's new baby. and my daughter's wedding. I think that is what keeps you going.

### Emotional/ Psychological Discourses

'Some Forms of Death Worry Me'

Fig. 1 and 1

the harmonic parameters of the control of the contr

### Emotional/ Psychological **Discourses**

'It's Very Hard Watching Them Die'

The worst part is of course wetching other people die and every one of them so gun kly guickly diest.

Harry Bankin watch

them die It yets you dinen a let But it's taught one so ough

### Emotional/ Psychological Discourses

### Time to say goodbye to people

· Esuppose like most people

I don't really look forward

I don't teally look forward
to a profonged death
Aithough I feet there is value
in having a title time to the
and people are aware of row dying.
I think i would want
I would want time to alsy goodbye to people
I would the some time
for explore in your dying.

to explore my own dying

Sudden death

would be okay, but i'd rather have a little time to get used to dying I don't want to die alune either.

## Emotional/ Psychological Discourses

• 'The Quicker the Better'

• I just want to be comfortable and free of pain.

### 'Holding On' and 'Letting Go' Discourses

 This holding on discourse often intersects with other nursing and medical discourses of dying.



### Spiritual Discourse

> Easing into a Peaceful Death Massage Giving permission to die

### **Ethics**

- Field of ethics is very broad
- It covers the full expanse of thought and action directed toward answering the question, What should I do?" (Komesaroff 2008, p. Xx iii)

# Data from Pamela's Phd

- . After her conalisation session Westily misses alread the southing and relaxing effects
- Lenjoyed the neck. Flike the feet too, maybe more than the hands
- That was a wooderful massage. Fire Been trunking about the rain lives) trees and witerfalls. Field the soon. Yes I went into the rain forest.

- That was lively. Lieally enjoyed it.
- Des Em frebing relaxed contented, nice and peaceful Southing

- Just relaxed no atress L'equid doft off ouro the rain forest

### Attending to Relational Ethics

- · 1.Procedural-mandated by the Research Ethics committees
- · 2.Situational-refers to ethics in practice: unexpected, unpredictable situations, where researcher has little control over events (Goodwin et al., 2003)
- 3.Relational-recognizes and values mutual respect, dignity and connectedness between researcher and researched, and between researchers and the communities in which they live and work (Lincoln in Ellis, 2007)

### More data -After a massage and meditation session, Gary commented on the relaxation effects.

- What you are saying is very soothing
- Lovely, lovely you have got the voice and the tone and the right words
- You have used all the right words
- Very peaceful
- It just feels very relaxed.
- You said take all the tension out
- There wasn't any tension to take out
  because you took it all out
- Yes. Just lying here my body could be elsewhere
- · Just like floating on a cloud
- It feels very, very light
  My body just feels so relaxed.

### Responsibilities of the researcher

Need to Ensure:

Participants' rights of autonomy choice, informed consent, lack of harm, confidentiality, anonymity respect and dignity are protected

(Seymour & Ingleton 1999)

### Reflexivity

- · Researchers should subject themselves to the same level of scrutiny they direct towards their participants. How?
- . Why did we choose to study what we study
- · What is the problem to be explored?
- · What are our assumptions?
- · What are our expectations about our participants?
- Acknowledge how aspects of our identities (gender class) and how they affect data and the participants

(McCorkel and Myers, 2003, Fonow and Cook, 1991, Hertz, 1997, and DeVault, 1995).

# Questions

## Ethical issues in researching death and dying

- Maintaining ethical conduct talking about death
- Informed consent
- Recruitment of participants gatekeepers
- Emotional challenges for the researcher
- Design needs to reflect core principles of palliative care

### References

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### Challenges in researching end of life care

- Difficulties in design
- Lack of agreed definitions of end of life care, palliative care
- Variable levels of awareness of diagnosis and prognosis in patients
- Difficulty in obtaining funds
- ▶ High attrition rates
- Managing the researcher's role
- Managing the emotions of participants, carers and researcher
- Inclusion approaches